Name of Offering

### CITITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

( check if this is an amendment and name has changed, and indicate change )



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DATE	RECEIV	ED

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Convertible Notes Due May 23, 2008
Filing Under (Check box(es) that apply):    Rule 504    Rule 505    Rule 506    Section 4(6)    ULOE
Type of Filing:  New Filing
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)
FastShip, Inc.
Address of Executive Offices (Number and Street, City, State, Zip Code)  1700 Market Street, Suite 2720 Philadelphia, PA 19103 (215) 574-1770
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (If different from Executive Offices)
Commercial cargo vessel design and operation.  THOMSON  RECEIVED
Type of Business Organization © corporation U limited partnership, already formed U business trust U limited partnership, to be formed
Actual or Estimated Date of Incorporation or Organization:    Month   Year
GENERAL INSTRUCTIONS
Federal:  Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.50 et seq. or 15 U.S.C. 77d(6).
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below of if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manual signed must be photocopies of the manually signed copy or bear typed or printed signatures.
Information Required: A new siling must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Part

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMDA control number.

A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

SEC 1972 (2-97) 1 of 8

#### Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Beneficial Owner Check Box(es) that Apply: Promoter Executive Officer ☐ General and/or Director Managing Partner Full Name (Last name first, if individual) Pederson, Einar Business or Residence Address (Number and Street, City, State, Zip Code) 1700 Market Street, Suite 2720 Philadelphia, PA 19103 Check Box(es) that Apply: ☐ Beneficial Owner & Executive Officer ☐ Promoter ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Bullard II, Roland K. Business or Residence Address (Number and Street, City, State, Zip Code) Philadelphia, PA 19103 1700 Market Street, Suite 2720 ☐ Beneficial Owner ☑ Executive Officer 13 Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Chambers, Kathryn Riepe Business or Residence Address (Number and Street, City, State, Zip Code) Philadelphia, PA 19103 1700 Market Street, Suite 2720 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Giles, David L. Business or Residence Address (Number and Street, City, State, Zip Codé) 1700 Market Street, Suite 2720 Philadelphia, PA 19103 Check Box(es) that Apply: ☐ Executive Officer ☐ General and/or ☐ Beneficial Owner Director ☐ Promoter Managing Partner منه Full Name (Last name first, if individual) Colgan, Dennis Business or Residence Address (Number and Street, City, State, Zip Code) 1700 Market Street, Suite 2720 Philadelphia, PA 19103 ☐.General and/or Check Box(es) that Apply: Promoter ☐ Director □ Beneficial Owner ☐ Executive Officer Managing Partner Full Name (Last name first, if individual) Riverfront Development Corporation Business or Residence Address (Number and Street, City, State, Zip Code) 701 North Broadway, Glouchester City, NJ 08030 ☐ General and/or Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer ☐ Director Managing Partner Full Name (Last name first, if individual) Dunn, David E. (Number and Street, City, State, Zip Code) Business or Residence Address 2550 M Street, NW. Washington, BC 20037 Palton Boggs LLP,

A. BASIC IDENTIFICATION DATA . \* . . .

2. Enter the information requested for the following:

1. Has t	he issuer so	old, or do	es the issu	er intend t	o sell, to i	non-accred	ited invest	ors in this	offering?	• • • • • • • •		Yes No
			Ans	wer also i	Appendi:	x, Column	2, if filing	under UI	LOE.			
2. What	is the min	imum inve	stment th	at will be	accepted fi	rom any ir	idividual?	• • • • • • • • •	•	•••••	••••••	: <b>\$10</b> ,000
7 Deer	the offerin	a sermit :	oist ous	whin of n	cinale vai	.1						Yes No
4. Enter sion of to be list the	the inform or similar re listed is an ac name of aler, you m	ation requinumention associated the broken	ested for e n for solici i person or r or dealer	ach person tation of p agent of . If more	who has bourchasers a broker o than five (	ecen or will in connecti r dealer re 5) persons	be paid or ion with sal gistered wi to be listed	given, dire es of secur th the SEC	ctly or ind ities in the	lirectly, an offering. I	y commis	l
Full Name	(Last nam	e first, if	individual)							<del></del>		
N/A												
Business o	r Residence	Address	(Number a	ind Street.	City, Star	e, Zip Co	de)					
Name of A	Associated 1	Broker or	Dealer							<del></del>		
States in V	Uhich Dere	n Listad	Uac Salidi	ed or Inte	nds to Sol	icit Durch	30000			<del></del>		
	"All States					•					•	☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[11]	1101	[ IA ].	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[AV]	[AW]	[WV]	[WI]	[WY]	[PR]
Full Name	(Last nam	e first, if	individual	)				<del></del>	·····			· · · · · ·
N/A					•				•			
Business o	or Residenc	e Address	(Number	and Street	. City, Sta	ite, Zip Co	ode) -					
* *			•					•				,
Name of	Associated	Broker or	Dealer									
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												☐ All States
(Cneck	"All State									[GA]	[HI]	[ID]
[IL]	[AK] [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO]	[CT] [ME]	[DE] [MD]	(DC) (MA)	[FL] [MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	(OH)	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[ហ]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Nam	ie (Last nai	me first, i		d)	<u> </u>							
N/A												
Business	or Residen	ce Addres	s (Number	and Stree	t, City, St	ate, Zip C	ode)					
	· 					<del></del>						
Name of	Associated	l Broker o	r Dealer			•				ë		
States in	Which Per	son Lister	i Has Soli	cited or Ir	itends to S	olicit Puro	hasers	······································				
	"All State											☐ All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	1
[IL]	[1N]	[ IA ]	[KS]	[KY]	[LA]	(ME)		[MA]	[MI]		[MS]	•
[MT]	[NE]	[NV] [SD]	[HN] [HT]	[ נи ] [ ХТ ]	[MM] [TU]			[MD] [WA]	(HO) [WV]	[OK] [WI]	[OR] [WY]	4 mm 1

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	and already exchanged.	Aggregate	Amount Aiready
	Type of Security	Offering Price	Sold
	Debt		_ S
	Equity	\$ <u>·</u>	_ S
	☐ Common ☐ Preferred	;	•
	Convertible Securities (including warrants)		
	Partnership Interests	\$	_ S
	Other (Specify)		
	Total	<b>\$</b> 455,000	s 455,000
	Answer also in Appendix, Column 3, if siling under ULOE.	•	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	99	<u>\$ 455,000</u>
	Non-accredited Investors	· •	_ S
	Total (for filings under Rule 504 only)	-	_ S
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Type of	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		_ s
	Regulation A	. ·	_ \$
	Rule 504	<i></i>	_ \$
	Total		_ s
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	•	·
	Transfer Agent's Fees		□ s
	Printing and Engraving Costs		\$ <u></u>
	Legal Fees		\$ \$ 3,000
	Accounting Fees		s
	Engineering Fees		S
	Sales Commissions (specify finders' fees separately)		□ S
	Other Expenses (identify)		s
	<b></b> 1		<b>3.</b> 000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount

tiç	Enter the difference between the aggregate in 1 and total expenses furnished in response djusted gross proceeds to the issuer."	to Part C - Question 4.	2. This difference is t	s- be .	<b>.</b> <b>.</b> 452 <b>,</b> 000
ol. W	dicate below the amount of the adjusted ground for each of the purposes shown. If the artimate and check the box to the left of the estimate adjusted gross proceeds to the issuer set for	ss proceeds to the issuer nount for any purpose is mate. The total of the pay	used or proposed to not known, furnish ; yments listed must ear	an :al	\$.432,000
				Payments Officer Directors Affiliate	s, & Payments To
	Salaries and fees		<u>S</u>	s_50,000	30,000
	Purchase of real estate	• • • • • • • • • • • • • • • • • • • •	🗖	s	🗆 s
•	Purchase, rental or leasing and installation				
	Construction or leasing of plant buildings	and facilities	🗖	\$	C S
	Acquisition of other businesses (including to offering that may be used in exchange for issuer pursuant to a merger)	the value of securities inv the assets or securities o	volved in this f another		
	Repayment of indebtedness		.,	5	os
	Working capital	• • • • • • • • • • • • • • • • • • • •	🗆		EX \$ 372,000
	Other (specify):			S	D \$
				) \$	D \$
	Column Totals	• • • • • • • • • • • • • • • • • • • •	E	] \$_ <sub>50.000</sub>	S 402,000
	Total Payments Listed (column totals add				s_452,000
		D. FEDERAL SIGN	ATURE		
ollo	issuer has duly caused this notice to be signed wing signature constitutes an undertaking by tof its staff, the information furnished by th	the issuer to furnish to th	ie U.S. Securities and	Exchange Co	ommission, upon written re-
ssuc	r (Print or Type)	Signature			Date
Fas	tShip, Inc.	Hop Rep	certus		6-14-2005
чаπ	e of Signer (Print or Type)	Title of Signer (Pr	int or Type)		
Kat	hryn Riepe Chambers	Executive Vic	e President		
			) a 		

1. Is any party described in 17 CFR 230.252(c), (d), (e) or (i) presently subject to any of the disqualification proof such rule?	
•	 , 40

FINE STATE SIGNATURE OF THE STATE SIGNATURE

## See Appendix, Column.5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times 25 required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date		
FastShip, Inc.	Kally here anders	6-14-2005		
Name (Print or Type)	Title (Print or Type)			
Kathryn Riepe Chambers	Executive Vice President			

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice of Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1		2	3			4		100 850	8.28.5°4.8°	
	to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)		•				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item I)	
State	Yes	No		Number of Accredited Investors		Number of Non-Accredited Investors	Amount			
AL						22163013	пвошх	Yes	No	
AK										
AZ						·				
AR										
CA										
СО										
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1		2	3	4					5 Disqualification		
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item1)		Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	(Part E- Yes			
MT				241031010			ZIBOUII	16	No		
NE											
NV			·								
ИН											
lи								-			
NM			A								
NY											
NC											
ND											
он		X	Convertible	1	\$25,000	0	0		X		
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OR											
РА		X	Convertible Notes \$430,000	8	\$430,000	0	0		X		
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